08/12/2009 09:01

Image# 29934427076

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Hospital and Healthsystem Assoc. of PA - Federal Political Action Comm (HAPAC) Post Office Box 8600 ADDRESS (number and street) Check if different than previously Harrisburg PA 17105 8600 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** CITY A ZIPCODE A IS THIS **AMENDED** NEW C00128082 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year Х (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 0 1 2009 06 30 2009 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mr James M. Redmond Type or Print Name of Treasurer Electronically Filed by Mr James M. Redmond 08 12 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2 / 44

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

Hospital and Healthsystem Assoc. of PA - Federal Political Action Comm (HAPAC)

D D <sup>®</sup>D 0 1 0 1 2009 0.6 3 0 2009 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2009° 3227.40 January 1 (b) Cash on Hand at 3227.40 Begining of Reporting Period ..... 70455.27 70455.27 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 73682.67 73682.67 6(a) and 6(c) for Column B) ..... 52295.58 52295.58 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 21387.09 21387.09 (subtract Line 7 from Line 6(d)) ..... Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 44

Write or Type Committee Name

Hospital and Healthsystem Assoc. of PA - Federal Political Action Comm (HAPAC)

Report Covering the Period:

From:

м м 0 1 D D 1

2009

To:

м м

<sup>D</sup> 3 0

Y Y Y Y Y 2 0 0 9

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	37537.50	37537.50
	(ii) Unitemized	30819.95	30819.95
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	68357.45	68357.45
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	68357.45	68357.45
	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.)	2097.82	2097.82
	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	70455.27	70455.27
	Total Federal Receipts (subtract Line 18(c) from Line 19)	70455.27	70455.27

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 44

rating Expenditures: Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share  (ii) Non-Federal Share  Other Federal Operating Expenditures  Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00 0.00 0.00	0.00
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
Other Federal Operating  Expenditures  Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	
Expenditures  Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))		0.00
Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))		
(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
•		0.00
nmittage	50000.00	50000.00
	50000.00	50000.00
eral Candidates/Committees Other Political Committees	0.00	0.00
pendent Expenditure	0.00	0.00
e Schedule E)rdinated Expenditures Made by Party	0.00	0.00
	0.00	0.00
	0.00	0.00
i nepayments iviaue		5.00
	0.00	0.00
a) Individuals/Persons Other	0.00	0.00
Than Political Committees		
,	0.00	0.00
	0.00	0.00
,		
(add Lines 28(a), (b), and (c))	0.00	0.00
er Disbursements	2295.58	2295.58
,	2.22	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
	2.22	0.00
, ,	0.00	0.00
Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
al Disbursements (add Lines 21(c) 22		
, , , , , , , , , , , , , , , , , , , ,	52295.58	52295.58
	52295 58	52295.58
	atributions to eral Candidates/Committees	turbutions to ereal Candidates/Committees

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 44

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Total Contributions (other than loans) rom Line 11(d), page 3)	68357.45	68357.45
_	Fotal Contribution Refunds from Line 28(d))	0.00	0.00
	let Contributions (other than loans) subtract Line 34 from Line 33)	68357.45	68357.45
	otal Federal Operating Expenditures add Line 21(a)(i) and Line 21(b))	0.00	0.00
	Offsets to Operating Expenditures from Line 15, page 3)	0.00	0.00
	let Operating Expenditures subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 44 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
` '	of PA - Federal Political Action Comm (HA	PAC)
Full Name (Last, First, Middle Initial) Mr. James M. Redmond	David	Date of Receipt
Mailing Address 1016 Chippenham		01 26 7 2009
City Mechanicsburg	State Zip Code PA 17050-7687	Transaction ID: 16281713
FEC ID number of contributing federal political committee.	C 17030-7007	Amount of Each Receipt this Period 500.00
Name of Employer Hospital and Healthsystem Assn of Penn Receipt For:	Occupation Sr. Vice President, Legislative Service Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	Contribution
Full Name (Last, First, Middle Initial) Mr. John E. Simodejka		Date of Receipt
Mailing Address 420 South Jackson	Street	01 29 7 2009
City	State Zip Code	Transaction ID: 16292912
Pottsville  FEC ID number of contributing federal political committee.	PA 17901-3692	Amount of Each Receipt this Period 500.00
Name of Employer Schuylkill Health System	Occupation President & Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	Contribution
Full Name (Last, First, Middle Initial) Mr. Timothy L. Ohrum		Date of Receipt
Mailing Address 404 West North Av	enue	02 / 05 / 7 7 7 7
City	State Zip Code	Transaction ID: 16321009
Pittsburgh  FEC ID number of contributing federal political committee.	PA 15212-4637	Amount of Each Receipt this Period  250.00
Name of Employer Hospital and Healthsystem Assn of Penn Receipt For:	Occupation Regional Director, Legislative Service	e
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	Contribution
CURTOTAL of Province This Province	J)	1250.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 44 (check only one)    X
A 0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may ne name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  Hospital and Healthsystem Assoc. of	f PA - Federal	Political Action Comm (HAI	PAC)
<u>_</u>	Full Name (Last, First, Middle Initial) Mr. Michael A. Suchanick			Date of Receipt
	Mailing Address 1646 Whitley Drive			02 16 2009
	City Harrisburg	State PA	Zip Code 17111	Transaction ID: 16348350  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Hospital and Healthsystem Assn of Penn	Occupatio Chief Op	n perating Officer	7
	Receipt For:  Primary General		e Year-to-Date ▼	1
	Other (specify) ▼		500.00	
_	Full Name (Last, First, Middle Initial) Ms. Paula Bussard			Date of Receipt
	Mailing Address 99 E. Yellow Breeche	02 16 2009		
	City	Transaction ID: 16348352		
	Carlisle	PA	17015-9174	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Hospital and Healthsystem Assn of Penn	Occupatio Senior V	n P, Policy & Regulatory Servi	ice
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
_	Full Name (Last, First, Middle Initial) Ms. Carolyn F. Scanlan			Date of Receipt
	Mailing Address 5 Merion Court			0 2 1 6 2 0 0 9
	City	State	Zip Code	Transaction ID: 16348354
	Hummelstown	PA	17036-9287	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Hospital and Healthsystem Assn of Penn		t and Chief Executive Office	r
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	Contribution
Г				1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 44 (check only one)  X 11a 11b 11c 12 13 14 15 16	
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.	
Hospital and Healthsystem Assoc. of	PA - Federal Political Action Comm (HA	APAC)	
Full Name (Last, First, Middle Initial) Mr. Martin J Ciccocioppo		Date of Receipt	
Mailing Address 1769 Wellington Drive	02 19 2009		
City Middletown	State Zip Code PA 17057-3425	Transaction ID: 16370553  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	500.00	
Name of Employer Hospital and Healthsystem Assn of Penn Receipt For:  Primary  General  Other (specify) ▼	Occupation Vice President, Research  Aggregate Year-to-Date ▼  500.00	Contribution	
Full Name (Last, First, Middle Initial) Capt. Kenneth J. Braithwaite, II, USNR Mailing Address Twin Magnolias		Date of Receipt	
165 Harvey Road	State Zip Code	02 19 2009 Transcript ID 16270557	
West Chester	PA 19382	Transaction ID: 16370557  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	500.00	
Name of Employer DVHC of HAP	Occupation Senior Vice President		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	Contribution	
Full Name (Last, First, Middle Initial) Mr. Thomas L. Grace		Date of Receipt	
Mailing Address 594 Forest Road			
City Wayne	State Zip Code PA 19087-2322	Transaction ID: 16663658	
FEC ID number of contributing federal political committee.	C 1906/-2322	Amount of Each Receipt this Period 250.00	
Name of Employer DVHC of HAP	Occupation Administration		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	Contribution	
SUBTOTAL of Receipts This Page (optional) .		1250.00	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 44 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mr Gary B Weinstein  Mailing Address 155 Wilson Avenue  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer Washington Hospital  Receipt For:  Primary  General  Other (specify)	State Zip Code PA 15301-3398  C  Occupation Executive Vice President Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Steven P Johnson, FACHE Mailing Address 777 Rural Avenue  City Williamsport  FEC ID number of contributing federal political committee.  Name of Employer Susquehanna Health  Receipt For: Primary General Other (specify)	State Zip Code PA 17701-3109  C  Occupation President and Chief Executive Officer Aggregate Year-to-Date  500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. William P Pearson, M.D.  Mailing Address 155 Wilson Avenue  City Washington  FEC ID number of contributing federal political committee.  Name of Employer Washington Hospital  Receipt For: Primary General Other (specify)	State Zip Code PA 15301-3398  C  Occupation Vice President Medical Affairs  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	· • • • • • • • • • • • • • • • • • • •	1250.00

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS  y information copied from such Reports and St	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 44 (check only one)  X 11a 11b 11c 12 13 14 15 16 17  on for the purpose of soliciting contributions
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc. of P	name and ad	dress of any political committee to	o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Mr. Telford W. Thomas, CHE Mailing Address 155 Wilson Avenue  City Washington  FEC ID number of contributing federal political committee.  Name of Employer Washington Hospital  Receipt For: Primary General Other (specify)		Zip Code 15301-3398  on at & Chief Executive Officer e Year-to-Date ▼ 500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
В.	Full Name (Last, First, Middle Initial) Ms. Shirley Hardy Mailing Address 111 Oakwood Road  City McMurray  FEC ID number of contributing federal political committee.  Name of Employer Washington Hospital  Receipt For: Primary General Other (specify)	State PA C Occupation CEO Aggregate	Zip Code 15317-2686 on e Year-to-Date ▼ 250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Full Name (Last, First, Middle Initial)  Mr. Michael P. Strazzella  Mailing Address 2860 S. Abingdon Street  City  Arlington  FEC ID number of contributing federal political committee.  Name of Employer Hospital and Healthsystem Assn of Penn  Receipt For:  Primary General  Other (specify)	State VA  C Occupation Vice Pre	Zip Code 22206-1317  on sident, Federal Relations e Year-to-Date ▼ 250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	UBTOTAL of Receipts This Page (optional)  OTAL This Period (last page this line number of			1000.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 44 (check only one)    X
\ \ \	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	ne name and ad	dress of any political committee to	solicit contributions from such committee.
	> Hospital and Healthsystem Assoc. of	r PA - Federa	Political Action Comm (HAI	SAC)
	Full Name (Last, First, Middle Initial) Mr. Edward C Pitchford			Date of Receipt
	Mailing Address 1001 East Second St	03 20 2009		
	City	State	Zip Code	Transaction ID: 16935909
	Coudersport	PA	16915	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Charles Cole Memorial Hos- pital	Occupation Presiden	n t and Chief Executive Office	 r
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		250.00	
_	Full Name (Last, First, Middle Initial) Mrs. Wendy Cameron			Date of Receipt
	Mailing Address 982 E. Beau Street	03 / 24 / Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 16940370
	Washington	PA	15301-2925	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Washington Hospital	Occupation Trustee	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	Contribution
_	Full Name (Last, First, Middle Initial) Evelyn Oteng-Bediako			Date of Receipt
	Mailing Address 134 W Lockhart St A	Apt 2		03 27 2009
	City	State	Zip Code	Transaction ID: 16976788
	Sayre	PA	18840-2148	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Guthrie Healthcare System	Occupation Physicia	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	]
Г	SUBTOTAL of Receipts This Page (optional)	<u> </u>		750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 44 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc. of	PA - Federa	l Political Action Comm (HAI	PAC)
Α.	Full Name (Last, First, Middle Initial) Dr. Kyra Bannister, MD			Date of Receipt
	Mailing Address 154 Dr A Strathmont F	03 27 7 2009		
	City Elmira	State NY	Zip Code 14905	Transaction ID: 16976799  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	14000	250.00
	Name of Employer Robert Packer Hospital	Occupation Anesthol		
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
– В.	Full Name (Last, First, Middle Initial) Ms. C. Angela Bontempo Mailing Address 232 West 25th Street	1		Date of Receipt
	City	State	Zip Code	04 06 2009
	Erie	PA	16544-0002	Transaction ID: 17036734  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Saint Vincent Health Cent- er	Occupation President	on at and Chief Executive Office	-
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	Contribution
_ C.	Full Name (Last, First, Middle Initial) Mr. Garry L Scheib	_		Date of Receipt
	Mailing Address 3400 Spruce Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Philadelphia	State PA	Zip Code 19104-4208	Transaction ID: 17041205  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	19104-4206	500.00
	Name of Employer Hospital of the University of Pennsylv	+ +	e Director	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1000.00
F	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number			1000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 44 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	
NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc. of	of PA - Federal Political Action Comm (HAF	PAC)
Full Name (Last, First, Middle Initial) Dr. Corey Rigberg, MD		Date of Receipt
Mailing Address P.O. Box 8700		04 08 2009
City	State Zip Code	Transaction ID: 17041209
Harrisburg FEC ID number of contributing	PA 17105-8700	Amount of Each Receipt this Period 250.00
federal political committee.	C	
Name of Employer PinnacleHealth System	Occupation Chair, Department of Psychiatry	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	]
Full Name (Last, First, Middle Initial) Mr. Louis J. Panza, Jr., CHE,		Date of Receipt
Mailing Address 1163 Country Club I	04 08 2009	
City	State Zip Code	Transaction ID: 17041245
<u>Monongahela</u>	PA 15063-1095	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Monongahela Valley Hospit- al	Occupation President & Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  Dawn Fuchs Heiser		Date of Receipt
Mailing Address 1000 W Pike St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17041253
<u>Houston</u>	PA 15342-1255	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Weavertown Env	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
		1000.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 44 (check only one)  X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	is and Statements may not be sold or used by any persor sing the name and address of any political committee to so.	
Full Name (Last, First, Middle Initial) Mr. Mark Stensager Mailing Address One Guthrie Squ City	State Zip Code	Date of Receipt    M
Sayre FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period  250.00
Name of Employer Guthrie Healthcare System  Receipt For:  Primary General Other (specify) ▼	Occupation President and Chief Executive Officer  Aggregate Year-to-Date   250.00	
Full Name (Last, First, Middle Initial) Mr. Ron J. Butler, CHE Mailing Address 447 Horse Thief	Run Road	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: 17060436
Wellsboro	PA 16901-7893	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Laurel Health System	Occupation President & CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Jan E. Fisher		Date of Receipt
Mailing Address 32-36 Central A	venue	04 16 2009
City	State Zip Code	Transaction ID: 17060444
Wellsboro FEC ID number of contributing federal political committee.	PA 16901-1840	Amount of Each Receipt this Period 500.00
Name of Employer Soldiers and Sailors Memo- rial Hospital Receipt For:	Occupation President & Chief Executive Officer  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate Year-to-Date ¥	
CURTOTAL of Possints This Page (and	ional)	1250.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 44 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			on for the purpose of soliciting contributions solicit contributions from such committee.
_	Hospital and Healthsystem Assoc. of F  Full Name (Last, First, Middle Initial)	PA - Federa	l Political Action Comm (HAF	PAC)
۸.	Ms. Kay A. Hamilton, RN, MS  Mailing Address 400 Highland Avenue			Date of Receipt    M
	City <u>Lewistown</u>	State PA	Zip Code 17044-1167	Transaction ID: 17083352  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Lewistown Hospital	Occupation Nursing	n Care Services	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) Ms. Chloe Eichelberger			Date of Receipt
	Mailing Address 1455 Detwiler Drive			04 24 2009
	City York	State PA	Zip Code 17404-1111	Transaction ID: 17083392
	FEC ID number of contributing federal political committee.	C	17404-1111	Amount of Each Receipt this Period 250.00
	Name of Employer Memorial Hospital	Occupatio CEO	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Paul Bacharach			Date of Receipt
	Mailing Address 500 West Berkeley Str	eet		04 29 7 2009
	City Uniontown	State PA	Zip Code 15401-5514	Transaction ID: 17134265  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Uniontown Hospital	Occupation Presiden	n It & Chief Executive Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1000.00
-	FOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 44 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ond Statements may not be sold or used by any persign the name and address of any political committee the of PA - Federal Political Action Comm (HA	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Gary D. Ott, M.D. Mailing Address 145 Hospital Ave		Date of Receipt
City Dubois	State Zip Code PA 15801-1462	Transaction ID: 17175037  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer DuBois Regional Medical Center Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date   250.00	
Full Name (Last, First, Middle Initial) Ms. Joan K. Richards Mailing Address 100 West Sproul F	Date of Receipt  05 05 05 07 07 07 07 07 07 07 07 07 07 07 07 07	
City	State Zip Code	Transaction ID: 17183765
Springfield	PA 19064-2033	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Crozer-Keystone Health Sy- stem	Occupation President & Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Richard L. Jones, Jr., FACHE		Date of Receipt
Mailing Address 1200 Old York Roa	ad	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State Zip Code	Transaction ID: 17183769
Abington  FEC ID number of contributing federal political committee.	PA 19001-3788	Amount of Each Receipt this Period 500.00
Name of Employer Abington Memorial Hospital	Occupation President & Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	al)	1250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 44 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any persor the name and address of any political committee to s	
NAME OF COMMITTEE (In Full)	of PA - Federal Political Action Comm (HAP	
Full Name (Last, First, Middle Initial) Mr. Norman V. Edmonson		Date of Receipt
Mailing Address 607 North Chester F		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17183783
Swarthmore	PA 19081-1014	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Crozer-Keystone Health Sy- stem	Occupation Trustee	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Donald A. Pizer, CPA		Date of Receipt
Mailing Address 606 Runnymede Av	05 / 05 / 2009	
City	State Zip Code	Transaction ID: 17183809
<u>Jenkintown</u>	PA 19046-2240	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer self employed	Occupation CPA	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ms. Margaret M McGoldrick		Date of Receipt
Mailing Address 1200 York Road		05 05 YYYYY 05 05 2009
City	State Zip Code	Transaction ID: 17183831
<u>Abington</u>	PA 19001-3788	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Abington Memorial Hospital	Occupation Executive Vice President and Adminis	T tr
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
	l)	1250.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 44 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
_	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Hospital and Healthsystem Assoc. of F	name and add	dress of any political committee to	solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) Shailesh D. Patel  Mailing Address 1110 Cardinal Lane  City Williamsport  FEC ID number of contributing federal political committee.  Name of Employer Susquehanna Health System  Receipt For: Primary General Other (specify)	State PA  C  Occupatio Anesthes  Aggregate		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
- В.	Full Name (Last, First, Middle Initial) Ms. Sally J. Dixon Mailing Address 325 South Belmont Str  City York  FEC ID number of contributing federal political committee.  Name of Employer Memorial Hospital  Receipt For: Primary General Other (specify)	State PA C Occupatio Presiden	Zip Code 17403-2609  n It and Chief Executive Office e Year-to-Date ▼ 500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
 C.	Full Name (Last, First, Middle Initial) Mr. William H. Pugh  Mailing Address 5 Woods Lane  City  Hanover  FEC ID number of contributing federal political committee.  Name of Employer PinnacleHealth System  Receipt For:  Primary General Other (specify)	State PA  C  Occupatio CFO  Aggregate	Zip Code 17331-9233 In Pe Year-to-Date ▼ 250.00	Date of Receipt  M M O D O B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of		<u> </u>	1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 44 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	of PA - Federal Political Action Comm (HAF	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Ms. Linda J. Ramsey, Esq.  Mailing Address 524 Strathmore Ro	ad	Date of Receipt  0 5 1 1 1 2 0 0 9
City  Havertown  FEC ID number of contributing	State Zip Code PA 19083	Transaction ID: 17189933  Amount of Each Receipt this Period  250.00
Name of Employer Crozer-Chester Medical Center Receipt For:  Primary  General  Other (specify) ▼	Occupation Director  Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Ms. Rita Spangler Mailing Address 1001 Grampian Bo	ulevard	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Williamsport	State         Zip Code           PA         17701-1946	Transaction ID: 17198294  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Susquehanna Health  Receipt For:  Primary  General  Other (specify) ▼	Occupation VP Facility Development  Aggregate Year-to-Date   250.00	
Full Name (Last, First, Middle Initial) Susan A. Duchman		Date of Receipt
Mailing Address 1001 Grampian Blv	/d	05 13 7 2009
City Williamsport	State Zip Code PA 17701-1946	Transaction ID: 17198300  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Susquehanna Health	Occupation Admin. Dir. Heart Center	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	al)	750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 44 (check only one)    X
Ar	y information copied from such Reports and for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements ma he name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Hospital and Healthsystem Assoc. o	f PA - Federa	Political Action Comm (HA	PAC)
۸.	Full Name (Last, First, Middle Initial)  Ms. Candace P. Dewar, RN  Mailing Address 777 Rural Avenue			Date of Receipt
		State	Zip Code	05 13 2009
	City Williamsport	State PA	2ip Code 17701-3145	Transaction ID: 17198304  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Susquehanna Health	Occupation VP/Chief	n Nursing Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
-	Full Name (Last, First, Middle Initial) Mr. Thomas Owlett, Esq.	<b> </b>		Date of Receipt
	Mailing Address Owlett & Lewis PO Box 878			05 14 2009
	City	State	Zip Code	Transaction ID: 17199977
	Wellsboro FEC ID number of contributing federal political committee.	C	16901	Amount of Each Receipt this Period 250.00
	Name of Employer Soldiers and Sailors Memo- rial Hospital	Occupatio Attorney	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Dr. Kevin P. Caputo, MD			Date of Receipt
	Mailing Address 2600 West Ninth Str	eet		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 17203535
	Chester  FEC ID number of contributing federal political committee.	C	19013-2098	Amount of Each Receipt this Period  250.00
	Name of Employer Crozer-Chester Medical Ce- nter Communit	<del>_ ' ' ' _ '</del>	n/Vice President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 44 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ì	NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc. of	PA - Federa	l Political Action Comm (HAI	PAC)
Α.	Full Name (Last, First, Middle Initial) Mr. Fred W. Shaffer  Mailing Address 1711 Sharpless Road			Date of Receipt
	<u> </u>			05 18 2009
	City Meadowbrook	State PA	Zip Code 19046-1029	Transaction ID: 17203539
	FEC ID number of contributing federal political committee.	C	19040-1029	Amount of Each Receipt this Period  250.00
	Name of Employer Abington Memorial Hospital	Occupation Retired	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
– В.	Full Name (Last, First, Middle Initial) Ms. Lorraine Pruitt	<u> </u>		Date of Receipt
	Mailing Address 1151 George Road	05 18 2009		
	City	State	Zip Code	Transaction ID: 17203565
	Meadowbrook  FEC ID number of contributing federal political committee.	C	19046-1109	Amount of Each Receipt this Period  250.00
	Name of Employer Abington Memorial Hospital	Occupation Chair, Al	<sub>on</sub> bington Memorial Hospital B	oar
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
с. С.	Full Name (Last, First, Middle Initial) Mr. Robert J Riethmiller, Jr.			Date of Receipt
	Mailing Address 1200 Old York Road			05 18 2009
	City	State	Zip Code	Transaction ID: 17203585
	Abington  FEC ID number of contributing federal political committee.	C	19001-3788	Amount of Each Receipt this Period  250.00
	Name of Employer Abington Memorial Hospital	Occupation Manager		
	Receipt For:  Primary  General  Other (specify) ▼	, ,	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)	1		750.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3)	()	Use separate schedule(s)	FOR LINE NUMBER: PAGE 22 / 44 (check only one)
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  Hospital and Healthsystem Assoc.	of PA - Federal	Political Action Comm (HAF	PAC)
Full Name (Last, First, Middle Initial)			
Mr. John H. Durham  Mailing Address P.O. Box 819			Date of Receipt
1316 Gypsy Hill Rd	State	Zip Code	05 18 2009
Gwynedd Valley	PA	19437-0819	Transaction ID: 17203593  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10 107 0010	250.00
Name of Employer Abington Memorial Hospital	Occupation Trustee	1	-
Receipt For:		Year-to-Date ▼	7
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Dr. William C McCauley			Date of Receipt
Mailing Address 1001 Grampian Boo	ulevard		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17207814
Williamsport	PA	17701-1946	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Susquehanna Health	Occupation Medical S		1
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. George Manchester, M.D.			Date of Receipt
Mailing Address 1001 Grampian Box	ulevard		05 19 2009
City	State	Zip Code	Transaction ID: 17207854
Williamsport	PA	17701-1946	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Susquehanna Health	Occupation Senior Vi	n ce President Medical Affairs	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	Contribution
			750.00

TOTAL This Period (last page this line number only) .....

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 44 (check only one)    X   11a
A oı	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Hospital and Healthsystem Assoc. of F	PA - Federa	l Political Action Comm (HA	PAC)
۱.	Full Name (Last, First, Middle Initial)  Ms. Christine A. Ballard, RN  Mailing Address 215 E. Water Street			Date of Receipt
	City	State	Zip Code	0 5 1 9 2 0 0 9  Transaction ID: 17207856
	Muncy	PA	17756-8828	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Muncy Valley Hospital	Occupation Administ		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	Contribution
	Full Name (Last, First, Middle Initial) Mr. Ronald M. Gilbert, Jr.			Date of Receipt
	Mailing Address 22 Walnut Street			05 28 2009
	City	State	Zip Code	Transaction ID: 17221749
	Wellsboro	PA	16901-1550	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Laurel Health System	Occupation Chief Fire	on nancial Officer	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
 ;.	Full Name (Last, First, Middle Initial) James Turri			Date of Receipt
	Mailing Address 1100 Grampian Boulev	vard		0 6 0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Williamsport	State PA	Zip Code 17701-1909	Transaction ID: 17223317  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	17701 1303	250.00
	Name of Employer Susquehanna Health	Occupation Sr. Vice	on President Outreach Services	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
[	SUBTOTAL of Receipts This Page (optional)			1000.00
	<b>FOTAL</b> This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3)	for each	parate schedule(s) n category of the d Summary Page	FOR LINE NUMBER: PAGE 24 / 44 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  Hospital and Healthsystem Assoc.	g the name and address of an	y political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Ms Meghan Patton  Mailing Address 1200 York Road			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Abington  FEC ID number of contributing federal political committee.	State Zip Co PA 1900	ode 1-3788	Transaction ID: 17240508  Amount of Each Receipt this Period  250.00
Name of Employer Abington Memorial Hospital  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Director Human R Aggregate Year-to-Da		
Full Name (Last, First, Middle Initial) Robert Harbison, III Mailing Address 2185 Papermill Ro	ad		Date of Receipt  0 6 0 2 2 0 0 9
City  Huntingdon Valley  FEC ID number of contributing federal political committee.	State Zip Co PA 19006	ode 6-5817	Transaction ID: 17240518  Amount of Each Receipt this Period  250.00
Name of Employer Abington Memorial Hospital  Receipt For:  Primary General  Other (specify) ▼	Occupation Retired Aggregate Year-to-Da	ate ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Norman B Epstein, , FACHE Mailing Address 112 North Seventh	Street		Date of Receipt
City Chambersburg FEC ID number of contributing federal political committee.	State Zip Co PA 1720	ode 1-1720	Transaction ID: 17248661  Amount of Each Receipt this Period  500.00
Name of Employer Summit Health  Receipt For:  Primary General  Other (specify) ▼	Occupation President Aggregate Year-to-Da	ate <b>▼</b>	
SUBTOTAL of Receipts This Page (option	al)		1000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 44 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person the name and address of any political committee to the	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Robert E. Wilson Mailing Address 1790 Ridley Creel	« Road	Date of Receipt
City  Media  FEC ID number of contributing	State Zip Code PA 19063-4528	Transaction ID: 17249350  Amount of Each Receipt this Period  250.00
Name of Employer Crozer-Keystone Health System Receipt For: Primary General Other (specify)	Occupation Sr. Vice President & CIO  Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Mr. Richard I. Bennett, CPA Mailing Address Healthplex Pavilio 100 West Sproul I City Springfield		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Crozer-Keystone Health System  Receipt For:  Primary General  Other (specify)	Occupation Senior Vice President & CFO Aggregate Year-to-Date  250.00	250.00
Full Name (Last, First, Middle Initial) Mr. Robert Dietz  Mailing Address Gannett Fleming, PO Box 67100	Inc.	Date of Receipt  0 6 0 8 2 0 0 9
City Harrisburg  FEC ID number of contributing federal political committee.	State Zip Code PA 17106	Transaction ID: 17250914  Amount of Each Receipt this Period  250.00
Name of Employer  Receipt For:  Primary General  Other (specify) ▼	Occupation Engineer  Aggregate Year-to-Date  250.00	
SUBTOTAL of Receipts This Page (option	nal)	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 44 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may not be sold or used by any person g the name and address of any political committee to	
NAME OF COMMITTEE (In Full)	of PA - Federal Political Action Comm (HAP	
Full Name (Last, First, Middle Initial) Dr Joseph Torchia, , M.D.		Date of Receipt
Mailing Address 503 North 21st Str	eet	06 / 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17250926
Camp Hill	PA 17011-2204	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Holy Spirit Hospital	Occupation Vice President Clinical Resource Man	<del>-</del> ag
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr John J Kelly, , M.D.  Mailing Address 1119 Hawthorne L.	ane	Date of Receipt
maining / tad cook	06 09 2009	
City	State Zip Code	Transaction ID: 17255414
Abington	PA 19001-3788	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Abington Memorial Hospital	Occupation Chief of Staff	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr Thomas Anderson, M.D.		Date of Receipt
Mailing Address 112 North Seventh	Street	06 12 YYYY 2009
City	State Zip Code	Transaction ID: 17262170
Chambersburg	PA 17201-1720	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Summit Health	Occupation Vice President Medical Affairs	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	Contribution
CURTOTAL of Descints This Dags (entire	al)	1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 44 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	of PA - Federal Political Action Comm (HAP	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mr. Kenneth L. Shur  Mailing Address 501 East Main Stre	et	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Waynesboro FEC ID number of contributing	State Zip Code PA 17268-2394	Transaction ID: 17262184  Amount of Each Receipt this Period  225.00
Receipt For:  Primary  Other (specify)	Occupation Vice President, Chief Operating Office Aggregate Year-to-Date  225.00	_
Full Name (Last, First, Middle Initial) Julia Winton  Mailing Address 3930 Chestnut Stre	pet	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Philadelphia  FEC ID number of contributing federal political committee.	State Zip Code PA 19104-3111  C	Transaction ID: 17262186  Amount of Each Receipt this Period  262.50
Name of Employer Hospital of the University of Pennsylv Receipt For:  Primary General Other (specify) ▼	Occupation Senior Director, Human Resources  Aggregate Year-to-Date   262.50	
Full Name (Last, First, Middle Initial) Dr. Elliot J. Sussman, MD Mailing Address PO Box 689	<b>-</b>	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Allentown FEC ID number of contributing federal political committee.	State Zip Code PA 18105-1556  C	Transaction ID: 17262188  Amount of Each Receipt this Period  375.00
Name of Employer Lehigh Valley Hospital & Health Networ Receipt For:  Primary General Other (specify) ▼	Occupation President & CEO  Aggregate Year-to-Date   375.00	
SUBTOTAL of Receipts This Page (options	al)	862.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28/44   (check only one)   X   11a		
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc.	of PA - Federal	Political Action Comm (HAI	PAC)		
Full Name (Last, First, Middle Initial) Ms. Sherri H. Stahl			Date of Receipt		
Mailing Address 4316 Lemar Road					
City Mercersburg	State PA	Zip Code 17236-9676	Transaction ID: 17262190  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		262.50		
Name of Employer Summit Health	Occupatio CNO-VP	n Patient Services			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 262.50			
Full Name (Last, First, Middle Initial) David J. McConnell			Date of Receipt		
Mailing Address RD# 4 Box 239d			0 6 1 7 2 0 0 9		
City	State PA	Zip Code	Transaction ID: 17270086		
Altoona  FEC ID number of contributing federal political committee.	C	16601-9754	Amount of Each Receipt this Period  262.50		
Name of Employer Clearfield Hospital	Occupatio Presiden	n t & CEO / CFO			
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 262.50			
Full Name (Last, First, Middle Initial) Ms. Mary L. Libengood			Date of Receipt		
Mailing Address 200 Hospital Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Meyersdale	State PA	Zip Code 15552-1247	Transaction ID: 17273523  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	13332-1247	375.00		
Name of Employer Meyersdale Medical Center	Occupatio Presiden				
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 375.00			
SUBTOTAL of Receipts This Page (optional	1)		900.00		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 44 (check only one)  X 11a 11b 11c 12 13 14 15 16
Ar	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma le name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Hospital and Healthsystem Assoc. of	PA - Federa	Political Action Comm (HA	PAC)
_	Full Name (Last, First, Middle Initial) Mr. Edward H. DePasquale  Mailing Address 1086 Franklin Street			Date of Receipt
	1000 FTATIKITI STEEL			06 19 2009
	City <u>Johnstown</u>	State PA	Zip Code 15905-4398	Transaction ID: 17273527
	FEC ID number of contributing federal political committee.	C	13903-4390	Amount of Each Receipt this Period 750.00
	Name of Employer Conemaugh Health System	Occupation Chief Fire	on nancial Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
	Full Name (Last, First, Middle Initial) Mr. Steven E Tucker	1		Date of Receipt
	Mailing Address 320 Main Street			06 19 2009
	City	State	Zip Code	Transaction ID: 17273529
	Johnstown	PA	15901-1601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		562.50
	Name of Employer Memorial Medical Center	Occupation Presiden		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		562.50	
	Full Name (Last, First, Middle Initial) Dr. Ronald Barg, M.D.			Date of Receipt
	Mailing Address 122 Broome Lane			0 6 1 9 2 0 0 9
	City	State	Zip Code	Transaction ID: 17273531
	Merion Station	PA	19066-1702	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		375.00
	Name of Employer University of Pennsylvania Health Syst	<del> </del>	edical Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional)	1		1687.50

Mailing Address 290 Haida Avenue PO Box 689  City State Zip Code Hastings PA 16646-0689  FEC ID number of contributing federal political committee.  Name of Employer Miners Medical Center  Receipt For: Primary Other (specify) ▼  Full Name (Last, First, Middle Initial)  Po 0 0 19 2 0 0 9  Transaction ID: 17273535  Amount of Each Receipt this Period  375.00  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)	I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  Apply information copied from such Reports and S	tatamente ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 44  (check only one)  X 11a  11b  11c  12  13  14  15  16  17
A. M. Scott A Becker  Mailing Address 1086 Franklin Street  City  PA 15905-4398  B. M. William R. Crowe, Mila Mailing Address 290 Haida Avenue PO Box 689  City  Hastings  FEC D number of contributing idedral political committee.  City  Hastings  PA 15905-4398  B. M. William R. Crowe, Mila Mailing Address 290 Haida Avenue PO Box 689  City  Hastings  PA 16646-0689  FEC D number of contributing idedral political committee.  City  Primary General  Other (specify) ▼  City  Primary General  Other (specify) ▼  Date of Receipt this Period  Transaction ID: 17273535  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17273535  Amount of Each Receipt this Period  Date of Receipt  City  Transaction ID: 17273535  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17273535  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17273535  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17273535  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17273535  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17273535  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17273535  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17273535  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17273535  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17273537  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17273537  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17273537  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17273537  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17273537  Amount of Each Receipt this Period  Transaction ID: 17273537  Amount of Each Receipt this Period  Transaction ID: 17273537  Amount of Each Receipt this Period  Transaction ID: 17273537  Amount of Each Receipt this Period  Transaction ID: 172735333  Transaction ID: 17273533  Transaction ID:	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	solicit contributions from such committee.
City  Johnstown  FEC ID number of contributing federal political committee  Receipt For:  PA 16905-4398  FUI Name (Last, First, Middle Initial)  Mailing Address 290 Halida Avenue PO Box 689  FEC ID number of contributing federal political committee  City  Hastings  FEC ID number of contributing  FEC ID numbe	∠ <b>A</b> .	Mr. Scott A. Becker			<del>-</del>
Johnstown  PA 15905-4398  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Conemaugh Health System  Conemaugh Health System  Chief Executive Officer  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Malling Address 290 Haida Avenue PO Box 689  City State Zip Code Hastings PA 16646-0689  FEC ID number of contributing federal political committee.  Name of Employer Miners Medical Center  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  John M. Moryken  Amount of Each Receipt this Period  Date of Receipt  M		TOO FIAIRIII Street			06 19 2009
FEC ID number of contributing tederal political committee.   C				·	
Receipt For:		FEC ID number of contributing		15905-4398	
Primary General Other (specify) ▼ 1125.00    Post of Receipt		Name of Employer Conemaugh Health System			
Mailing Address 290 Haida Avenue PO Box 689  City Hastings PA 16646-0689  FEC ID number of contributing federal political committee.  C.  Full Name (Last, First, Middle Initial) John M. Moryken  Mailing Address 111 Highland Ave  City Hollidaysburg FEC ID number of contributing federal political committee.  C.  Full Name (Last, First, Middle Initial) John M. Moryken  Mailing Address 111 Highland Ave  City Hollidaysburg FEC ID number of contributing federal political committee.  C.  Name of Employer More State Zip Code PA 16648-9736  Full Name (Last, First, Middle Initial) John M. Moryken  Mailing Address 111 Highland Ave  City For State Zip Code PA 16648-9736  FEC ID number of contributing federal political committee.  Name of Employer Conemaugh Health System  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼		Primary General	Aggregate	1125.00	
City Hastings PA 16646-0689  FEC ID number of contributing federal political committee.  Name of Employer Miners Medical Center Primary General Other (specify) ▼  State Zip Code PA 16646-0689  Coccupation President and Chief Executive Officer  Receipt For: Primary General Other (specify) ▼  State Zip Code PA 16648-9736  City State Zip Code FEC ID number of contributing federal political committee.  City State Zip Code FEC ID number of contributing federal political committee.  Name of Employer Conemaugh Health System  Receipt For: Primary General Other (specify) ▼  Coccupation System Executive, Development & Mixing  Aggregate Year-to-Date ▼	- В.	Mr. William R. Crowe, MBA			Date of Receipt
Hastings PA 16646-0689  FEC ID number of contributing federal political committee.    Name of Employer Miners Medical Center		PO Box 689	Ctata	7:n Codo	06 19 2009
FEC ID number of contributing federal political committee.  Name of Employer Miners Medical Center  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) John M. Moryken Mailing Address 111 Highland Ave  City State Zip Code PA 16648-9736  FEC ID number of contributing federal political committee.  Name of Employer Conemaugh Health System  Receipt For: Primary General Occupation System Executive, Development & Mkting  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Transaction ID: 17273537  Amount of Each Receipt this Period  System Executive, Development & Mkting  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  State Zip Code Transaction ID: 17273537  Amount of Each Receipt this Period  562.50		•		•	
Miners Medical Center  Receipt For:    Primary		FEC ID number of contributing			
Other (specify) ▼    State   Zip Code   Transaction ID: 17273537		Name of Employer Miners Medical Center			<u> </u>
C. John M. Moryken  Mailing Address 111 Highland Ave  City State Zip Code Hollidaysburg PA 16648-9736  FEC ID number of contributing federal political committee.  Name of Employer Conemaugh Health System  Receipt For: Primary General Other (specify) ▼  Date of Receipt  M M / D D / 2 0 0 9  Transaction ID: 17273537  Amount of Each Receipt this Period  562.50		Primary General	Aggregate	1 1 1 1 1 1 1	
City Hollidaysburg PA 16648-9736  FEC ID number of contributing federal political committee.  Name of Employer Conemaugh Health System  Receipt For: Primary Other (specify) ▼  State Zip Code Transaction ID: 17273537  Amount of Each Receipt this Period  562.50  C  Aggregate Year-to-Date ▼  562.50	- C.	,			Date of Receipt
City State Zip Code Transaction ID: 17273537  Hollidaysburg PA 16648-9736  FEC ID number of contributing federal political committee.  Name of Employer Conemaugh Health System  Receipt For:  Primary General Other (specify) ▼  State Zip Code Transaction ID: 17273537  Amount of Each Receipt this Period  562.50  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼		Mailing Address 111 Highland Ave			
FEC ID number of contributing federal political committee.  Name of Employer Conemaugh Health System  Receipt For:  Primary General Other (specify) ▼  Occupation System Executive, Development & Mkting  Aggregate Year-to-Date ▼  562.50		•		Zip Code	Transaction ID: 17273537
Name of Employer Conemaugh Health System  Receipt For:  Primary Other (specify) ▼  Occupation System Executive, Development & Mkting  Aggregate Year-to-Date  562.50			PA	16648-9736	Amount of Each Receipt this Period
Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  562.50			C		562.50
Primary General Other (specify) ▼  562.50			System	Executive, Development & M	kting
SUBTOTAL of Receipts This Page (optional)		Primary General	Aggregate		
		SUBTOTAL of Receipts This Page (optional)	I		2062.50

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 44 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	, ,	on for the purpose of soliciting contributions
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	the name and add	dress of any political committee to	solicit contributions from such committee.
Hospital and Healthsystem Assoc.	of PA - Federal	Political Action Comm (HA	PAC)
Full Name (Last, First, Middle Initial) Joseph Dado			Date of Receipt
Mailing Address 1130 Lauralynn Dr			06 19 2009
City	State	Zip Code	Transaction ID: 17273539
<u>Johnstown</u>	PA	15905	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		562.50
Name of Employer Conemaugh Health System	Occupation Adminstr		
Receipt For:	<del></del>	e Year-to-Date ▼	_
Primary General	, iggi cgale		7
Other (specify) ▼	0 0	562.50	
Full Name (Last, First, Middle Initial) Mary A. York	'		Date of Receipt
Mailing Address 334 Rockfield Road	d		06 19 2009
City	State	Zip Code	Transaction ID: 17273541
<u>Pittsburgh</u>	PA	15243-1408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		562.50
Name of Employer Conemaugh Health System	Occupation Chief Lea	n arning Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 562.50	
Full Name (Last, First, Middle Initial) Claudia Rager			Date of Receipt
Mailing Address 1252 Adams Ave			06 19 2009
City	State	Zip Code	Transaction ID: 17273545
Mineral Point	PA	15942-4502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		562.50
Name of Employer Conemaugh Health System	Occupation VP Patie	n nt Care Services	
Receipt For:	Aggregate	e Year-to-Date ▼	7
Primary General Other (specify) ▼	33 13411	562.50	]
SUBTOTAL of Receipts This Page (optional	al)		1687.50

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 44 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any persone name and address of any political committee to	13 14 15 16 16 17 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19
NAME OF COMMITTEE (In Full)	f PA - Federal Political Action Comm (HAF	
Full Name (Last, First, Middle Initial) Elaine M. Lambert		Date of Receipt
Mailing Address 145 Burkey Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17273547
Portage	PA 15946-7506	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	562.50
Name of Employer Conemaugh Health System	Occupation President-CHI	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 562.50	
Full Name (Last, First, Middle Initial) David J. Carlson		Date of Receipt
Mailing Address 451 Orchard St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17273555
<u>Johnstown</u>	PA 15905-2537	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	562.50
Name of Employer Conemaugh Health System	Occupation CMO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	562.50	
Full Name (Last, First, Middle Initial) Stephen Tambolas		Date of Receipt
Mailing Address 2719 Keystone Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17273560
<u>Johnstown</u>	PA 15905	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	262.50
Name of Employer Conemaugh Health System	Occupation VP Facilities & Supply Chain	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 262.50	Contribution
SUBTOTAL of Receipts This Page (optional)		1387.50

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 44 (check only one)    X
A	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Hospital and Healthsystem Assoc. of	ne name and add	dress of any political committee to	o solicit contributions from such committee.
\ \.	Full Name (Last, First, Middle Initial) Mr. John J. McElwee, Jr. Mailing Address 9724 Lock Tender Le		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Date of Receipt
	City Williamsport	State MD	Zip Code 21795-4065	Transaction ID: 17279848  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		375.00
	Name of Employer Chambersburg Hospital  Receipt For:  Primary  General  Other (specify) ▼	Occupation VP Aggregate	Year-to-Date ▼	
	Full Name (Last, First, Middle Initial) Gerald E. Murray  Mailing Address 302 Logan Blvd	Serald E. Murray		
	City	State	Zip Code	0 6 2 3 2 0 0 9 Transaction ID: 17279886
	Altoona	PA	16602-3119	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Altoona Regional Health System	Occupation CEO		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
_	Full Name (Last, First, Middle Initial) Karen G Aichele			Date of Receipt
	Mailing Address 1401 Rickert Road			06 23 7 2009
	City Perkasie	State PA	Zip Code 18944-2617	Transaction ID: 17279890  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10077 2017	375.00
	Name of Employer Best effort	Occupation Best effo		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional)	1		1050.00

ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 34 / 44   (check only one)		
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc.					
Full Name (Last, First, Middle Initial) Mr Patrick W O'Donnell, CPA			Date of Receipt		
Mailing Address 112 North Seventh	Mailing Address 112 North Seventh Street				
City Chambersburg	State PA	Zip Code 17201-1720	Transaction ID: 17284314  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		375.00		
Name of Employer Summit Health	Occupation Vice Pres	sident Finance			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	Contribution		
Full Name (Last, First, Middle Initial) Craig Pate			Date of Receipt		
Mailing Address 1001 South George	•				
City York	State PA	Zip Code 17403-3676	Transaction ID: 17285271  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	11 100 0010	262.50		
Name of Employer WellSpan Health	Occupation Dentist	1			
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 262.50			
Full Name (Last, First, Middle Initial) Ms. Patricia G. Sullivan			Date of Receipt		
Mailing Address 21st Floor Penn To 3990 South 34th St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Philadelphia	State PA	Zip Code 19104-4321	Transaction ID: 17285275  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		375.00		
Name of Employer University of Pennsylvania Health Syst	<del>- + '</del>	Vice President, Clinical Dev	,		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00			
			1012.50		

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  Any information copied from such Reports and S	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 44 (check only one)  X 11a 11b 11c 12 13 14 15 16 17  Son for the purpose of soliciting contributions
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Hospital and Healthsystem Assoc. of	e name and ad	dress of any political committee t	o solicit contributions from such committee.
<b>∠</b> <b>A.</b>	Full Name (Last, First, Middle Initial)  Ms. Joan M. Doyle  Mailing Address 399 South 34th St 21st Floor  City  Philadelphia  FEC ID number of contributing	State PA	Zip Code 19104-4316	Date of Receipt  M M M C D D C C Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer University of Pennsylvania Health Syst Receipt For: Primary Other (specify)	Occupation Executiv	on e Director e Year-to-Date ▼ 375.00	
– В.	Full Name (Last, First, Middle Initial) Charles T. Aitken Mailing Address 314 Sherry Way  City	State	Zip Code	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
	Cherry Hill  FEC ID number of contributing federal political committee.	NJ C	08034-3005	Transaction ID: 17287390  Amount of Each Receipt this Period  262.50
	Name of Employer Hospital of the University of Pennsylv Receipt For:  Primary  General  Other (specify) ▼	<del>, '                                     </del>	Administrator e Year-to-Date   262.50	
С.	Full Name (Last, First, Middle Initial) Dr. James L. Mullen, MD Mailing Address 3223 Saw Mill Road	1		Date of Receipt  0 6 2 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 17287392
	Newtown Square  FEC ID number of contributing federal political committee.	PA C	19073-1704	Amount of Each Receipt this Period 375.00
	Name of Employer Hospital of the University of Pennsylv Receipt For:  Primary General Other (specify) ▼	Occupation Surgeon Aggregate		
	SUBTOTAL of Receipts This Page (optional)			1012.50
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS  Any information copied from such Reports	Use separate schedule(s) for each category of the Detailed Summary Page and Statements may not be sold or used by any personal statements.	FOR LINE NUMBER: PAGE 36 / 44 (check only one)  X 11a 11b 11c 12 13 14 15 16 17  on for the purpose of soliciting contributions		
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ng the name and address of any political committee to	solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) Ms. Elizabeth B. Johnston Mailing Address 235 W. Willow Gi	rove Avenue	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip Code	Transaction ID: 17287394		
<u>Philadelphia</u>	PA 19118-3918	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	375.00		
Name of Employer Pennsylvania Hospital	Occupation Health Care Administration			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00			
Full Name (Last, First, Middle Initial) Dr. R. Nick Bryan, MD  Mailing Address 316 South Front S	, , , ,			
City	State Zip Code	0 6 2 5 2 0 0 9  Transaction ID: 17287396		
Philadelphia	PA 19106-4310	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	750.00		
Name of Employer Hospital of the University of Pennsylv Receipt For: Primary General Other (specify)	Occupation Radiologist  Aggregate Year-to-Date ▼  750.00			
Full Name (Last, First, Middle Initial)		1		
Mr. Keith A. Kasper  Mailing Address 1325 E. Meetingh	ouse Road	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y		
City	State Zip Code	Transaction ID: 17287398		
Lower Gwynedd	PA 19002-1302	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	750.00		
Name of Employer University of Pennsylvania Health Syst	Occupation AVP Finance & Budget			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00			
SUBTOTAL of Receipts This Page (optio	nal)	1875.00		
TOTAL This Period (last page this line nu	mber only)			

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 44 (check only one)    X
A	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	Hospital and Healthsystem Assoc. of	PA - Federa	Political Action Comm (HAI	PAC)
۸.	Full Name (Last, First, Middle Initial) Mr. Albert Black, Jr.			Date of Receipt
	Mailing Address 3400 Spruce Street			06 25 7 2009
	City	State	Zip Code	Transaction ID: 17287405
	Philadelphia	PA	19104-4208	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		375.00
	Name of Employer Hospital of the University of Pennsylv	Occupation Chief Op	n perating Officer	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	375.00	
. —	Full Name (Last, First, Middle Initial) Dr. Stuart L. Fine, MD			Date of Receipt
	Mailing Address 914 Sorrell Lane	06 25 2009		
	City	State	Zip Code	Transaction ID: 17287410
	Bryn Mawr	<u>PA</u>	19010-1927	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		375.00
	Name of Employer University of Pennsylvania Health Syst	Occupation Ophthalr		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	375.00	
_	Full Name (Last, First, Middle Initial) Judy Schueler			Date of Receipt
	Mailing Address 3411 Chestnut St			06 26 2009
	City	State	Zip Code	Transaction ID: 17288385
	Philadelphia	PA	19104-5530	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		750.00
	Name of Employer University of Pennsylvania Health Syst	Occupatio VP, Hum	n nan Resources	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	Contribution
	SUBTOTAL of Receipts This Page (optional) .			1500.00

A.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)	FOR LINE NUMBER: PAGE 38 / 44
		for each category of the Detailed Summary Page	(check only one)         X       11a       11b       11c       12         13       14       15       16       17
Any information copied from such Reports ar or for commercial purposes, other than using			
NAME OF COMMITTEE (In Full)			
Hospital and Healthsystem Assoc.	of PA - Federal	Political Action Comm (HAI	PAC)
Full Name (Last, First, Middle Initial) Ms. Kathleen Kinslow			Date of Receipt
Mailing Address 16 Annesley Drive			06 29 7 2009
City	State	Zip Code	Transaction ID: 17291460
Glen Mills	PA	19342-1358	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		750.00
Name of Employer Pennsylvania Hospital	Occupatio Executive	n e Director	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 750.00	Contribution

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	750.00
TOTAL This Period (last page this line number only)	<b>•</b>	37537.50

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate scho for each category Detailed Summary	of the
A	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	ne name and address of any political o	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	Hospital and Healthsystem Assoc. o	PA - Federal Political Action Co	omm (HAPAC)
_	Full Name (Last, First, Middle Initial) Citizens For Altmire		Date of Receipt
	Mailing Address P.O. Box 1776		04 08 2009
	City	State Zip Code	Transaction ID: 17041360
	Freedom	PA 15042	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C00413310	510.32
	Name of Employer	Occupation	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	5	Prepaid event costs
	Full Name (Last, First, Middle Initial) Kathy Dahlkemper For Congress	Date of Receipt	
	Mailing Address PO Box 1045	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	
	City	State Zip Code	Transaction ID: 17052432
	<u>Erie</u>	PA 16512	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C00440271	986.01
	Name of Employer	Occupation	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼		Prepayment-Event costs
_	Full Name (Last, First, Middle Initial) Kathy Dahlkemper For Congress		Date of Receipt
	Mailing Address PO Box 1045		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 17142921
	<u>Erie</u>	PA 16512	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C00440271	95.81
	Name of Employer	Occupation	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	Prepayment-Event costs
	SUBTOTAL of Receipts This Page (optional)	1	1592.14

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	Check only one)
	Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc. of PA	- Federal	Political Action Comm (HAF	PAC)
Α.	Full Name (Last, First, Middle Initial) Allyson Schwartz For Congress			Date of Receipt
	Mailing Address P.O. Box 2232			05 01 2009
	City	State	Zip Code	Transaction ID: 17185323
	<u>Jenkintown</u>	PA	19046	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C00	389197	486.73
	Name of Employer	Occupation	1	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 486.73	Prepayment-Event costs

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	486.73
TOTAL This Period (last page this line number only)	<b>•</b>	2078.87

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		E NUMBER:	PAGE 41 / 44
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check of 21b 27	X 22 23 28a 28b	24 25 26 28c 29 30
Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc. of PA - F	·			
Full Name (Last, First, Middle Initial)  AHAPAC-American Hospital Association Fe	ederal PAC		Transaction ID: Date of Disburse	
Mailing Address 325 Seventh Street, N.W. Suite 700	= = = = = = = = = = = = = = = = = = = =			
Washington [	State Zip Code DC 20004		Amount of Each	Disbursement this Period
Purpose of Disbursement AHAPAC 1ST TRANSFER 2009 4/8/09 Candidate Name		011		10000.00
AHAPAC-American Hospital Association Fe		Category/ Type		TD0555
Senate	Primary General Other (specify)		4/8/09	TRANSFER 2009
Full Name (Last, First, Middle Initial)				: 17216285 ement
Mailing Address 325 Seventh Street, N.W. Suite 700				
	State Zip Code OC 20004		Amount of Each	Disbursement this Period
Purpose of Disbursement AHAPAC 2ND TRANSFER 5/08/09		011		10000.00
Candidate Name AHAPAC-American Hospital Association Fe	ederal PAC	Category/ Type		
	nent For: Primary General Other (specify) ▼		AHAPAC 2ND 09	TRANSFER 5/08/-
Full Name (Last, First, Middle Initial)  AHAPAC-American Hospital Association Fe	Full Name (Last, First, Middle Initial) AHAPAC-American Hospital Association Federal PAC			
Mailing Address 325 Seventh Street, N.W. Suite 700	e e e e e e e e e e e e e e e e e e e			
	State Zip Code 20004		Amount of Each	Disbursement this Period
Purpose of Disbursement AHAPAC 3RD TRANSFER-5/26/09	AHAPAC 3RD TRANSFER-5/26/09			20000.00
	Candidate Name AHAPAC-American Hospital Association Federal PAC			
	nent For: Primary General Other (specify) ▼		AHAPAC 3RD 09	TRANSFER-5/26/-
SUBTOTAL of Disbursements This Page (optional)				40000.00
TOTAL This Period (last page this line number only).				

S	CHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 42 / 44
ΙT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	y one)  X 22 23 24 25 26 28a 28b 28c 29 30b
	y Information copied from such Reports and Stat for commercial purposes, other than using the na	•		· ·
$\rangle$	NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc. of PA	- Federal Political Action Co	omm (HAPA	AC)
	Full Name (Last, First, Middle Initial) AHAPAC-American Hospital Association	n Federal PAC		Transaction ID: 17289347 Date of Disbursement
	Mailing Address 325 Seventh Street, N. Suite 700	W.		06 06 7 25 7 2009
	City Washington	State Zip Code DC 20004		Amount of Each Disbursement this Period
	Purpose of Disbursement AHAPAC 4TH TRANSFER-6/25/09		011	10000.00
	Candidate Name AHAPAC-American Hospital Association	r Federal PAC	Category/ Type	
	Office Sought: House Disbu Senate President	rsement For: Primary General Other (specify)		AHAPAC 4TH TRANSFER-6/25/- 09
	State: District:			

SUBTOTAL of Disbursements This Page (optional)	•	10000.00
TOTAL This Period (last page this line number only)	<b>•</b>	50000.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	) FOR LINE (check on	E NUMBER: PAGE 43 / 44	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22	
ny Information copied from such Reports and St r for commercial purposes, other than using the				
NAME OF COMMITTEE (In Full)	and address of any pointer			
Hospital and Healthsystem Assoc. of F	PA - Federal Political Action	Comm (HAP	AC)	
Full Name (Last, First, Middle Initial)	Full Name (Last, First, Middle Initial)			
The Hospital & Healthsystem Associat	Date of Disbursement			
Mailing Address P.O. Box 8600	$\begin{bmatrix} 0 & 4 & M \\ 0 & 4 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 8 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 2 & 0 & 0 & 0 \end{bmatrix}^{Y}$			
City Harrisburg	Amount of Each Disbursement this Period			
Purpose of Disbursement	439.47			
HAP ALTMIRE EVENT ADMINISTRATIVE (	COSTS	003		
Candidate Name		Category/ Type		
Office Sought: House Disk	oursement For:		HAP ALTMIRE EVENT ADMINIS-	
President	Primary General Other (specify) ▼		TRATIVE COSTS	
State: District:				
Full Name (Last, First, Middle Initial) The Hospital & Healthsystem Associat	Transaction ID: 17052424			
The hospital & healthsystem Associat	Date of Disbursement			
Mailing Address P.O. Box 8600	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
City Harrisburg	State Zip Code PA 17105-8600	ı	Amount of Each Disbursement this Period	
Purpose of Disbursement			492.29	
HAP- DAHLKEMPER EVENT-ADMINISTRA Candidate Name	003 Category/			
Garididate Name				
-	oursement For:		HAP- DAHLKEMPER EVENT-ADM-	
Senate President	Primary General Other (specify) ▼		INISTRATIVE COSTS	
State: District:				
Full Name (Last, First, Middle Initial) Sue Stewart			Transaction ID: 17052426	
	Date of Disbursement			
Mailing Address 792 Garriston Road	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
City Lewisberry	State Zip Code PA 17339		Amount of Each Disbursement this Period	
Purpose of Disbursement	423.75			
SUE STEWART-DAHLKEMPER EVENT- VI				
	Candidate Name Category/ Type			
Candidate Name				
Candidate Name  Office Sought: House Disk	oursement For:		SUE STEWART-DAHLKEMPER EV-	
Candidate Name  Office Sought: House Disk	Primary General		SUE STEWART-DAHLKEMPER EV- ENT- VENUE COSTS	
Candidate Name  Office Sought: House Disk			SUE STEWART-DAHLKEMPER EV- ENT- VENUE COSTS	
Candidate Name  Office Sought: House Senate President	Primary General Other (specify) ▼	Туре	SUE STEWART-DAHLKEMPER EV- ENT- VENUE COSTS	

S	CHEDULE B (FEC Form 3X)	Use separate schedule(s)	_	E NUMBER: PAGE 44 / 44
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check or 21b 27	niy one) 22
	ly Information copied from such Reports and Statem for commercial purposes, other than using the name		d by any persor	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Hospital and Healthsystem Assoc. of PA -			
. <b></b> _	Full Name (Last, First, Middle Initial) Sue Stewart			Transaction ID: 17142882 Date of Disbursement
	Mailing Address 792 Garriston Road			0 4 M / D 3 0 / Y 2 0 0 9 Y
	City Lewisberry	State Zip Code PA 17339		Amount of Each Disbursement this Period
	Purpose of Disbursement SUE STEWART-DAHLKEMPER EVENT-VENUE Candidate Name	E COSTS	003 Category/	95.81
		ement For: Primary General Other (specify)	Type	SUE STEWART-DAHLKEMPER EV- ENT-VENUE COSTS
	Full Name (Last, First, Middle Initial) HAPSCO Group  Mailing Address P.O. Box 8600			Transaction ID: 17184773 Date of Disbursement  M 5 M / D 0 6 / Y Y Y O 9 Y 2 0 0 9
	City Harrisburg	State Zip Code PA 17101-8600		Amount of Each Disbursement this Period
	Purpose of Disbursement HAPSCO SCHWARTS PRINTING COSTS	003	78.61	
	Candidate Name		Category/ Type	
	Office Sought:  Senate  President  State:  Disburse	ement For: Primary General Other (specify)		HAPSCO SCHWARTS PRINTING COSTS
	Full Name (Last, First, Middle Initial) The Hospital & Healthsystem Association	Transaction ID: 17184775 Date of Disbursement		
	Mailing Address P.O. Box 8600			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Harrisburg	State Zip Code PA 17105-8600		Amount of Each Disbursement this Period
	Purpose of Disbursement HAP-SCHWARTZ-ADMINISTRATIVE COSTS Candidate Name		003 Category/ Type	408.12
	Office Sought:    House   Disburse     Senate   President     State: District:	ement For: Primary General Other (specify)	, , , , , , , , , , , , , , , , , , ,	HAP-SCHWARTZ-ADMINISTRATI- VE COSTS
<u>ر</u>	1			582.54
Г	COTAL This Period (last page this line number only)			1938.05
L'	VIAL THIS I CHOW (last page this line number only)			1000100